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025991 PTO/SB/80 (01-06)

POWER OF APPLICATIONS BEFORE THE USPTO

| I hereby appoint: Practitioners associated with the Customer Number: OR Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used): | I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b). | | | | | | | |
|---|---|------------------|------------------------------|------------------------------|---------------------|----------------------|------------------------|--|
| OR Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used): Name | | | | | | | | |
| Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used): Name | | | r: | 20350 | | | | |
| Name Registration Number as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to: The address associated with Customer Number: 20350 | | | | | | | | |
| as attomey(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to: The address associated with Customer Number: 20350 | | | | | | | | |
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| The address associated with Customer Number: OR Firm or Individual Name Address City Country Telephone Assignee Name and Address: Renesas Technology Corp. 4-1, Marunouchi 2-chome, Chiyoda-ku Tokyo, Japan A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record | | | | | | | | |
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| SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee | and must | t identify the a | pplication in which this Po | wer of Attorney | s to be filed. | | | |
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| Signature Katanhamuto Date Oct. 25, 2006 | Signature Kotsuhamuto | | | 0 | | Date Oct. 28 | 4,2006 | |
| Name Katsuhiro TSUKAMOTO Telephone | Name | Katsu | | | | Telephone | | |
| Title President & COO | Title | Presi | dent & COO | | | | | |